STATE WATER RESOURCES CONTROL BOARD STATE DEPARTMENT OF HEALTH

SFUND RECORDS CTR

PRODUCER OF WASTE (Must be filled by producer)	HAIT PR ON WASHIE (Mart he 4411ed has been 199000408
	HAULER OF WASTE (Must be filled by hauler)
Name (print or type): Code No.	Name (print or type): All AMERICAN OIL COMPANY
Pick up Address: (Street) (City)	Business Address: 8655 So. Main Street, Los Angeles 9000 9de No.
Telephone Number: (P.O. or Contract Na.:	Telephone Number: 213) 759-6145 Pick Up: 8treet 19 19 75 Time: : □pm
Order Placed By: Double FAVORS Date: \$119/97	State Liquid Waste Hauler's Registration No. (if applicable): 118
Type of Process	Job No.: 03.5% 7 No. of Loads or Trips; Unit No.:
which Produced Wastes: (Examples: metal plating, equipment cleaning, oil drillingCode No.	Vehicle: vacuum truck formarrels, flatbed, other
wastewater treatment, pickling bath, petroleum refining)	The described waste was hauled by me to the disposal (specify)
DESCRIPTION OF WASTE (Must be filled by producer)	facility named below and was accepted.
Check type of wastes:	I certify (or declare) under penalty of perjury that the foregoing is true
1. Acid solution 8. Tank bottom sediment 2. Alkaline solution 9. 011	and correct. Signature of authorized agent and table
3. Pesticides 10. Drilling mud	DISPOSER OF WASTE (MODERALING INDICATE)
4. Paint sludge 11. Contaminated soil and sand 5. Solvent 12. Cannery waste	Name (print or type): 2425 So. Garffeld Code No.
6. Tetraethyl lead sludge 13. Latex waste 7. Chemical toilet wastes 14. 2 Mad and water	Monterey Park, Cali: Code No.
15. 🗆 Brine	
Other (Specify) WAS/E QUOLANT	The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RMQCB requirements, State
Code No.	Department of Health regulations, and local restrictions.
Components:	Quantity measured at site (if applicable): State fee (if any):
(Examples: Hydrochloric acid, lime, caustic soda, Goncentration: phenolics, solvents (list), metals (list), Upper Lower % ppm	Handling Method(s):
organics (list), cyanide)	recovery
<u></u>	
2	treatment (specify): (Examples: incineration newtral station, precipitation)-Code No.
	(Examples: incineration, newtral seation, precipitation)-Code No. disposal (specify): pond spreading sendful injection well
<u> </u>	other (spec/fy): // Code No.
·	If waste is held for disposal elevery posity finel location:
<u></u>	Disposal Date:
6,	I certify (or declare) under penalty of perjury that the foregoing is true
Hazardous Experties of Waste:	and correct.
pH none toxic flamable corrosive explosive	Signature of authorized agent and title
Buik Volume: / CyC)	The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.
Containers: (42 gal) (specify)	state Department of nearth with monthly ree raports.
(Number) drums cartons bags other	
Physical State: solid solid sludge other	
(specify)	
Special Handling Instructions (if any):	
	AORSGA
The waste is described to the best of my ability and it was delivered to	Mondo
a licensed liquid waste hauler (if applicable).	FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING
I certify (or declare) under penalty / //	THE PROPERTY AND ADDRESS OF THE PROPERTY OF TH

of perjury that the foregoing is true and correct.

HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.

D.O.T. Proper Shipping Name